

"Still
The Second
Best Thing
About Payday"

The NIH Record

'Communities in Unity'

Morella, Wynn Address NIH Diversity Congress

By Carla Garnett

Centuries ago, NIH'ers might have gathered in togas at the local forum to discuss changing "e pluribus unum," that is, from many into one. This being 1995, styles and words have moved with the times, but the seemingly elusive goal of harmonious unification remains just out of reach: How can so many different people—of diverse countries and cultures, of varied abilities and educational backgrounds—work together peaceably toward one vision? The question was asked and answered many times Oct. 25-27 as employees gathered at the Natcher Bldg. for "Framework for Change: Communities in Unity," NIH's first-ever Diversity Congress.

Coordinated by the Office of Equal Opportunity and cosponsored by every institute, center and division at NIH, the congress had three purposes: To review the effectiveness of existing NIH groups and committees involved with diversity and EEO issues and make recommendations regarding possible establishment of an NIH-wide Diversity Council; to



Vocalist Cara Stewart sings and signs the National Anthem to kick off NIH's first-ever Diversity Congress.

develop the best strategies for implementation of the Workplace Diversity Initiative throughout NIH; and to develop strategies for educating and

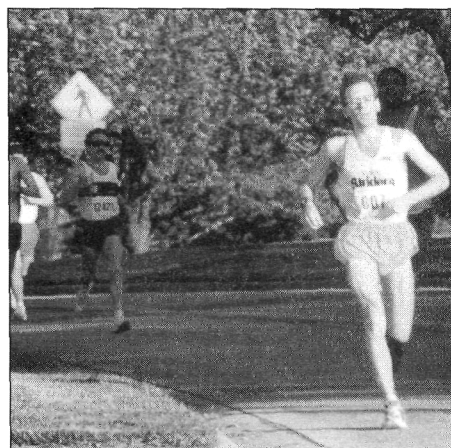
(See DIVERSITY CONGRESS, Page 8)

Best Runner on Campus?

NIDR's Mark Hoon Relaxes on His Feet

By Rich McManus

Dr. Mark Hoon runs to relax, to get away from it all. And he gets away from it all faster than most runners in metropolitan Washington. Whether measured in meters, miles or marathons, his efforts usually put him at or near the first finishers in the races he enters.



Hoon leads the pack down Center Dr. in the Office Depot 5K held last May.

The soft-spoken native of Derby, in the north of England, has been at NIH for just over 3 years. In that time, he has mixed molecular biology and biochemistry with some rather stunning performances on the road, including: winning October's Rockville Runfest 10K (10,000-meter run); winning May's Office Depot 5K (conducted on the NIH campus, where Hoon occasionally trains); winning, from 1992 through 1994, the NIH Pumpkin Chase 5K; finishing second in the 1995 Bethesda Chase 20K Race; placing fifth (in 2:28) in the 1994 Marine Corps Marathon; placing sixth in the 1995 Race for the Cure 5K; and finishing a respectable 39th in the 1995 Cherry Blossom 10-Miler, where a world record was set last spring and where Hoon established his

(See MARK HOON, Page 4)

Workshop Sets Course For Biomaterials' Future

By Louise Williams

Replacement organs made entirely of human tissue. Smart drugs with memory. Noninvasive procedures for once-serious surgeries. Vastly improved quality of life—and huge health care savings.

That's the promise of biomaterials. But that promise has been threatened by complex issues, including a materials shortage and a rise in lawsuits.

To find a way out of this crisis, NIH recently sponsored a 2-day workshop titled "Biomaterials and Medical Implant Science: Present and Future Perspectives." Altogether, 12 NIH institutes and centers provided support for the workshop; NHLBI hosted the event.

Workshop participants came from academia, industry, and the federal government and represented a wide range of fields including bioengineering, chemistry, materials sciences, clinical medicine, and device design.

The participants agreed that the field needs to pull together and speak with a unified voice so that the public understands that the crisis is "very real" and

(See BIOMATERIALS, Page 6)

NIH to Hold Annual King Program, Jan. 11

The NIH 1996 Commemorative Program in honor of Dr. Martin Luther King, Jr.'s life and work will be held Thursday, Jan. 11 from 11:30 a.m. to 1 p.m. in the Natcher Bldg. auditorium. The program theme is "The Dream: Let Each One Teach One."

Cosponsored by NINDS, NIAAA, CC, NIAID, NIDDK, and NIGMS, the program will feature Channel 4 news anchor Jim Vance as the keynote speaker. Vance, a native of Ardmore, Pa., received his bachelor of science degree in secondary education from Cheyney University in Cheyney, Pa. He began his career in journalism as a reporter for the *Philadelphia Independent* newspaper and a part-time news reporter for radio station WHAT-AM while also serving as a teacher in the public school system. Vance, who joined the Channel 4 news family in 1969, is a long-time supporter

(See KING PROGRAM, Page 2)

KING PROGRAM

(Continued from Page 1)

of community efforts and programs and is often called upon to address schools, businesses, and government committees.

The Largo High School Choir, composed of 150 members in grades 9-12, and the NIH Pre-School Song and Dance Troupe, under the direction of Lucretia Watkins-Diaby, also will participate in the program.

In addition, the observance will be shown on closed-circuit television at NIA facilities in Baltimore and NIEHS facilities in Research Triangle Park, N.C. The sponsors of this event are asking employees to bring canned food donations to the program. All donations will be distributed to area homeless shelters. A reception for all attendees is also being planned.

Sign language interpretation will be provided. For more information or for reasonable accommodation needs, call Levon Parker, 6-5332. □

Workshop on Cord Blood Stem Cells Set, Dec. 13

The National Heart, Lung, and Blood Institute and FDA's Center for Biologics Evaluation and Research are hosting a "Workshop on Cord Blood Stem Cells: Discussion of Procedures for Collection and Storage" on Dec. 13 in the auditorium of the Natcher Conference Center.

The workshop will try to identify essential steps in collecting, processing, and storing cord blood for use in transplantation. Discussion topics include: informed consent, medical history, screening of mother and cord blood for infectious agents, collection site and containers, anticoagulants, red blood cell depletion methods, short- and long-term storage conditions, freezing methods, histocompatibility testing, and quality assurance.

Attendance is free but seating is limited. To register, contact Wanda Keyes of Prospect Associates by phone, (301) 468-6555, or fax (301) 770-5164. For nonregistration questions, call Dr. Liana Harvath of FDA, 6-2577, or Jodi Shelley of NHLBI, 5-0065. □

Conference Explores Physical Activity Needs

Physical activity protects against the development of heart disease, both directly and through its effects on such risk factors as high blood pressure, high blood cholesterol, diabetes/insulin resistance, and overweight.

But how much physical activity is needed for cardiovascular health? Is moderate activity enough or is a vigorous, sustained effort needed? And can too much physical activity be harmful?

To find answers, NIH will host a Consensus Development Conference on Physical Activity and Cardiovascular Health on Dec. 18-20 in the Natcher Conference Center.

Sponsors are NHLBI and the Office of Medical Applications of Research. Cosponsors are NICHD, NIA, NIAMS, NIDDK, NINR, the Office of Research on Women's Health, the Office of

questions as: What is the health burden of a sedentary lifestyle on the population? What type, what intensity, and what quantity of physical activity is important to prevent cardiovascular disease? What are the benefits and risks of different types of physical activity for people with cardiovascular disease?

The panel is chaired by Dr. Russell V. Luepker of the University of Minnesota School of Public Health in Minneapolis. Speakers include such experts as Dr. Claude Bouchard of Laval University in Sainte Foy, Quebec; Dr. Steven N. Blair of the Cooper Institute for Aerobic Research in Dallas; Dr. William Haskell, Dr. Marcia Stefanic, and Nancy Houston-Miller of Stanford University; Dr. Russell R. Pate of the University of South Carolina; Dr. I-Min Lee of Brigham and Women's Hospital in Boston; Dr. Arthur S. Leon of the University of Minnesota.

The panel's statement will be presented at a press conference at Natcher at 1 p.m. on Dec. 20.

To register, contact Debra DeBose, (301) 770-3153. The agenda also is available online at <http://text.nlm.nih.gov/nih/ta/fliers/pa.html>. Attendance is free. □

NIH
Consensus Development
Conference

Physical Activity & Cardiovascular Health

December 18-20, 1995
Natcher Conference Center
National Institutes of Health
Bethesda, Maryland

Disease Prevention, the Centers for Disease Control and Prevention, and the President's Council on Physical Fitness and Sports.

Besides reviewing scientific evidence on primary prevention, the conference also will address the role of physical activity in secondary prevention, including cardiac rehabilitation. Other topics to be covered are factors that influence the adoption of physical activity by children, minorities, and others. Data show a decline in physical activity among many Americans in the past decade.

The special panel will address such key

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Conference Suggests New Image of Dietary Fats

Many Americans are reducing or removing fat from their diets, even switching to vegetarian diets to avoid the animal fats said to increase people's risk for conditions such as heart disease. But researchers at a meeting of the International Society for the Study of Fatty Acids and Lipids (ISSFAL), held recently at NIH, portrayed certain fats as actually vital for good health.

Physicians, biochemists, geneticists and nutritionists from at least 15 countries met at the Second International Congress of ISSFAL, cosponsored by NIAAA, to share their findings on how fats function in the body. A major focus was on essential fatty acids (EFAs).

EFAs are fats found in fish, vegetable oils and meats that mammals cannot manufacture but must obtain preformed.

One of the meeting's primary goals, said Dr. Artemis Simopoulos of the Center for Genetics, Nutrition, and Health in Washington and meeting cochair, "was to present the latest research on mechanisms by which fatty acids contribute to health and influence disease." The scientists reported on a range of studies from subcellular to clinical, demonstrating that EFAs have effects on cardiovascular disease, arthritis, insulin resistance and other disorders.

EFAs are part of the family of polyunsaturated fatty acids (PUFAs), which generally are thought to be healthful in contrast to their molecular cousins, the saturated fatty acids (found in lard and dairy products). As components of cell membranes, researchers reported, PUFAs affect how well cells receive signals and carry out their specialized functions. These effects, in turn, influence essential tissue operations in such organs as the brain, eye, and liver. For example, NIAAA researcher Dr. Burton Litman noted that below-adequate levels of certain EFAs in the body have been closely associated with deficient visual functioning. His research suggests that the amounts of EFAs in their membranes influence how well retinal cells detect light.

Several speakers at the meeting demonstrated the importance of certain EFAs, specifically docosahexaenoic acid (DHA), in normal brain development and function. They did so by presenting research on an array of conditions linked by their association with DHA deficiency. Addressing alcoholism, Dr.

Norman Salem, Jr., chief of the Laboratory of Membrane Biochemistry and Biophysics, NIAAA, and meeting cochair, reported that heavy daily alcohol consumption over time lowers EFA levels, including DHA, in the brains of animals and humans. Animals fed alcohol and diets containing barely adequate amounts of EFAs for over a year (a diet approximating that of alcoholics) showed signs of visual and brain function deficits. Salem suggested that decreased DHA may play a part in the brain deficits associated with alcoholism and that diet therapy may help to prevent or treat some of the cognitive aspects of the disease.

Several scientists compared the development of babies fed breast milk and those fed infant formula, which does not contain DHA. Formula fed infants had lower DHA levels in their tissues, disturbed sleep cycles, decreased visual acuity and poorer performance on tests of early cognition. These infants' brain fatty acid patterns are similar to those seen in alcoholics, Salem noted. Babies given formula containing a DHA supplement showed better visual acuity than those whose formulas were not supplemented, suggesting that DHA is necessary for normal visual development.

Children also can be the victims of genetic abnormalities, often in the codes for specific enzymes, that result in shortages of specific EFAs. Babies with adrenoleukodystrophy, a disorder caused by faulty fat-processing enzymes, demonstrate visual impairments and neurological disabilities. In the severest cases (known as Zellwegers syndrome), children may die within a few months of birth. These children have profoundly depressed tissue levels of DHA, two scientists reported. Using dietary therapy in preliminary clinical trials to boost DHA, Dr. Manuela Martinez, of the University Maternity-Children's Hospital "Vall d'Hebron" in Barcelona, Spain, noted that as her patients' DHA levels return to normal their neurological symptoms improve.

Delving further into the relationships between EFAs and chronic disorders, meeting participants found that EFAs may prevent cells from the overproduction of certain proteins such as fatty acid synthase and interleukin-1 that contribute to obesity and inflammatory disorders. Researchers also presented evidence that the body converts EFAs to

compounds such as leukotrienes that combat these disorders. People with rheumatoid arthritis were reported to benefit from diets rich in one type of EFA, termed omega-3 fatty acids, which may exert their effect through these activities. The extent of the benefit, however, was small.

Some researchers noted that EFAs influence production of other proteins, such as lipogenic and glycolytic enzymes. They suggested that fish oils could suppress uncontrolled cell growth through a similar mechanism, providing the omega-3 EFAs with a possible role in cancer prevention. Dr. George Blackburn of the Cancer Research Institute in Boston reported that patients at high risk of developing colon cancer benefitted from fish oil supplements given to them as part of a low fat diet for 6 months. Blackburn said he had seen no uncontrolled cell growth in the tissue lining the colons of the patients fed fish oil. Among patients fed corn oil, he noted that these cells continued to proliferate.

Dr. Len Storlein of the University of Wollongong in Australia reported DHA's role in insulin resistance and its related disorders, obesity and diabetes. He found that the lower the amount of DHA in muscle cell membranes, the greater a person's insulin resistance, or inability to transfer glucose—the body's energy source—into cells. He presented data demonstrating that Pima Indians of the American Southwest have low tissue levels of DHA, which may account for this group's high incidence of insulin resistance, obesity and diabetes. According to Simopoulos, ISSFAL is preparing a statement on fatty acids and insulin resistance.

ISSFAL scientists have begun to discover ways that omega-3 EFAs help prevent cardiovascular disease (CVD). For example, fish oil helps to prevent atherosclerotic plaques from forming in blood vessels by interfering in several stages of plaque formation. Long chain EFAs, such as DHA, also were reported both to prevent and halt ventricular arrhythmias in animals. These EFAs have been found to promote cardiovascular health by increasing the efficiency of cardiomyocytes, the cells responsible for heart contractions.

The need for clinical studies of EFAs' roles in many disease areas, says Simopoulos, "is paramount." □

MARK HOON

(Continued from Page 1)

personal best time at that distance—52:16.

Not bad work for a guy who actually has a life outside of running.

"It's a nice pastime," he observes calmly. "It's a good way of relaxing after work. That's the main reason I do it."

Competing in races, he says, is simply "a way to keep from being lazy and relaxing too much. And, like most scientists," he allows, "I'm competitive."

Hoon is part of the taste and smell unit within NIDR's Laboratory of Immunology. His group is studying the activity of a G protein called "gustducin," which is involved in mediating the sensation of taste.

"The signaling cascade in taste is very similar to that in vision," he explains. Scientists picked the name gustducin for the protein because its function is very similar to the G protein involved in vision—transducin.

Since competitive science requires long hours and uncertain schedules that are easily interrupted by the vagaries of experiments, Hoon runs mostly alone, which suits his need for decompression.

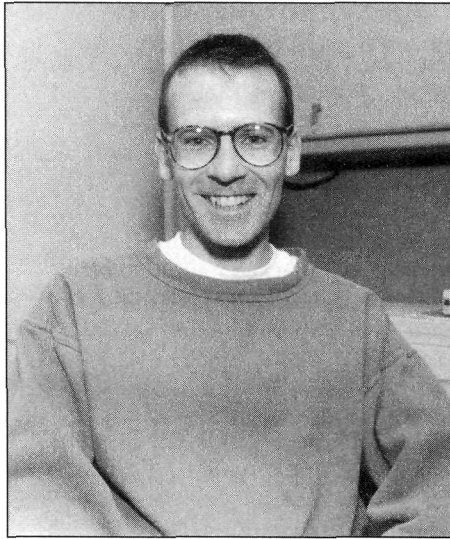
He began running in high school, competing in cross-country events. While an undergraduate at the University of Birmingham, he played field hockey. Later, at the University of Leeds, where he obtained his Ph.D., Hoon joined a running club and began entering road races and marathons. He's been running ever since, with no plans of stopping.

"Normally, I don't win the races I enter," he observes. "I'm reasonably good, but I don't put in the time that you need to win these races. There are a lot more dedicated people out there who go running every night."

In training, as we spoke, for the Nov. 19 Philadelphia Marathon, Hoon says his recent marriage to a fellow NIDR scientist and runner, Marilyn, leaves him little time for the serious race preparations undertaken by world-class athletes. "My wife wouldn't put up with it," he laughs.

Typically, Hoon runs around 30 miles a week—usually Monday, Wednesday and Friday—with a longer weekend jaunt tagged on. He adds extra miles in the 8 weeks leading up to his once-yearly participation in a marathon (26 miles, 385 yards), he said.

Favorite training sites include the grass—not the bike path—along Rock Creek: "It protects your knees to run on



Hoon says his desire to win races is simply an offshoot of his scientific competitiveness.

grass rather than pavement." Now that it gets dark early after work, he runs the well-lit NIH campus. "It feels safe, at least," he chuckles.

Hoping to equal in Philadelphia his personal best time in a marathon (2:24), set in a race in his home town of Derby, Hoon approaches the race with Rocky-like intensity and a biochemist's insight.

"A marathon requires a lot of thought. Your breathing and pace must be constant throughout, even up and down hills. You don't want to get out of breath ever—you can't be panting—that's what I tell myself. The first 20 miles should be enjoyable, but the last 6 miles you have to work. You have to start hurting during those last 3 miles. If you don't, you're not trying."

Hoon tries to reach his mileage peak about 2 weeks before a marathon, then drop gradually to just 20 miles the week before. In the final 7 days before a Sunday marathon, his diet changes to protein-only from Monday through Thursday. And his road work diminishes to a light jog on the Friday before the race.

"During those days I just want to get calories, so I eat steaks, beans, fish and cheese. Then, beginning at lunch on Friday, I eat huge amounts of pasta. That continues through Saturday night."

Ironically, it was a nonscientist who explained to him the rationale for such a diet. Its point, he explains, is to remove all glycogen from muscle tissue, then rebuild it during the pasta-gorging period. The effect? "You build up straight-chain carbohydrates that enzymes can digest easier." Hoon has tried this recipe and found it true—he

has completed three marathons on this diet and hasn't hit "the wall," yet.

On race day, Hoon likes to get up 2 hours before the contest and drink maybe three cups of tea or juice—but no solid food. "All the blood in your body is going to your muscles, so the food wouldn't digest anyway," he says. He also trades in his heavier, cushier training shoes for a lighter pair.

During a marathon, Hoon tries to maintain a 5-5½-minute per mile pace, grabbing mouthfuls of water on the fly at each water station; the one time he didn't take water, he felt rotten at race's end. He also tries not to let the excitement induced by cheering crowds along a race course prompt him to run too fast.

About two-thirds of the way into the race, Hoon likes to pick a runner to catch up with. "It's a nice motivational strategy. Sometimes your goal is simply not to fall further behind that person."

The last 3 miles, he says, "is more about sheer determination. I like to push myself as hard as I can."

Once across the finish line, Hoon faces a period of recuperation: "After 26 miles you've done some damage to your muscles, which takes time to heal. I usually have trouble walking down stairs a week after a marathon. But it's not like I'm an invalid. I don't need a wheelchair or anything."

It's best to run again fairly soon, to get rid of lactic acid in the muscles, he says. "I take as many hot baths as I can to loosen up my muscles. Usually about 3 weeks after a marathon I feel completely recovered."

He's not so bad off that he can't ride his bike in to work from his home a mile away, a practice he adheres to in all weather. "It's very convenient—it would take me longer to drive here and find a place to park. I also feel more awake when I get the fresh air."

Lately, Hoon and other elite area runners have been sponsored by the local Racquet & Jog store, which supplies him with running shoes now, and perhaps clothes later. The dozens of t-shirts he obtains by registering for so many races either go into rotation as training togs or are given away. "My wife is amazed by the sheer volume of them," he notes. He's also won a fair amount of trophies—"The more hideous, plastic ones I give as a joke to one of my colleagues in the lab."

Hoon is reluctant to make too much of his success as a runner, describing himself as simply a competitor who restricts

himself to local contests, a guy who trains as best he can in a climate that can be too hot in the summer, occasionally too cold in the winter, and whose job permits precious little free time anyhow.

Constant marathoning, he decides, with a smile more relieved than rueful, "is too rigid. You can't organize your whole life around it. If you make it too much of a way of life—a doctrine—you don't enjoy it as much."

Besides, Hoon and his wife enjoy other pursuits such as walking and camping. Yes, he'd like to do Boston some day ("It was the 100th anniversary this year, and I figured it would just be too crowded," he shrugs, explaining why he blew it off), and some half-marathons in Virginia are on the horizon, but Hoon will be happiest simply to get his 3-4 runs in each week, and remain fit enough to snap off a good 10K every now and then. Now age 31, he hopes to be able to run—as his dad did—a marathon when he's 50.

"Most reasonably fit people should be able to run a 10K," he says.

We should all relax as healthily as Hoon.

P.S. Hoon finished third in the Philadelphia Marathon—out of a field of 3,000 runners on a cold, blustery day—in a time of 2:25:21. □

AAAS Elects Four NIH'ers

Four NIH scientists were among 273 people who were recently elected fellows of the American Association for the Advancement of Science (AAAS). They were chosen because of their efforts toward advancing science or fostering applications deemed scientifically or socially distinguished.

The new fellows from NIH are: Dr. Jay Berzofsky, NCI; Dr. Mary Anne Brock, NIA; Dr. Stephen Marx, NIDDK; and Dr. Louis Miller, NIAID.

The scientists will be presented with an official certificate and a gold and blue (representing science and engineering, respectively) rosette pin on Feb. 10 at a fellows forum during the 1996 AAAS annual meeting in Baltimore.

The tradition of electing AAAS fellows began 121 years ago in 1874. Founded in 1848, AAAS represents the world's largest federation of scientists and has more than 140,000 members. The association publishes the weekly, peer-reviewed journal *Science*.

Improved Tests for Carcinogenicity Use Fewer Animals

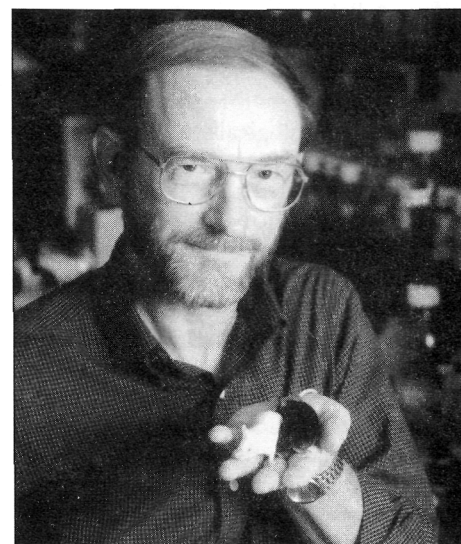
Scientists at NIEHS have reported that two lines of mice, each with a modified gene, appear to provide a quicker, more sensitive test for agents that cause cancer or genetic mutation.

Because the modified genes make the mice particularly sensitive, they can be used to screen suspect chemicals for low-dose reactions in as little as 3 to 6 months, the scientists said. Conventional testing of substances at NIEHS for its sister National Toxicology Program takes 2 years of dosing two species of rodents, rats and mice.

Although the scientists recommend that the more sensitive rodents, called transgenic mice, be used at first only to supplement the classic 2-year studies used by the federal government, the project leader, Dr. Raymond W. Tennant, said, "What this all means, I believe, is that we finally have identified a plausible alternative—although not a replacement—to the expensive long-term animal studies." In addition, fewer transgenic than regular mice are required.

The scientists reported on the use of the new lines of mice in the October *Environmental Health Perspectives*, the journal of NIEHS.

The authors said, "There are many chemicals in commercial use or in the environment that have not been tested and thousands of new chemicals are synthesized each year. There is a clear



Dr. Ray Tennant, NIEHS scientist, holds two mice similar to those genetically modified strains that have proven useful for shorter chemical carcinogenicity tests using fewer animals.

need to improve the process of carcinogen identification not just so that more chemicals can be evaluated, but also to achieve a better understanding of human risk from exposure to them."

Judicious use of the two transgenic models, the scientists said, could speed up testing of chemicals, improve prioritization of chemicals, and focus studies on low-level dose-responses. □

Education Can Reduce Asthma Severity in Minority Kids

Simple, culturally appropriate patient and family education programs in asthma self-management can result in reduced hospitalizations and emergency room visits, as well as fewer school and work days missed in low-income minority communities. These are the principal conclusions from five NHLBI studies of "Interventions for the Control of Asthma Among Black and Hispanic Children."

The studies also show that convenient, user-friendly asthma education programs for physicians, rather than traditional lectures, can produce substantial increases in the numbers of asthma patients diagnosed early and more appropriate use of medications to prevent and relieve asthma symptoms.

Asthma is a chronic lung disease that affects nearly 5 million American children under age 18. Despite advances in research and improved therapy, the disease has been increasing in frequency,

severity, and mortality during the past decade, especially among African American and Hispanic children. Asthma is approximately three times more common among African Americans than whites and four times more common among Puerto Rican children living in New York City than among whites. The asthma death rate is three times higher in African Americans than in whites, and has been rising steadily.

The NHLBI studies, begun in 1989, were designed to develop model interventions to improve medical care and provide education in asthma self-management to children and their families in African-American and Hispanic communities.

The preliminary results of these programs have been incorporated into a publication, *Asthma Management in Minority Children: Practical Insights for Clinicians, Researchers, and Public Health Planners*. □

BIOMATERIALS

(Continued from Page 1)

affects "all American families," as one speaker noted.

The group endorsed a set of recommendations that covers three broad avenues of research: biologically based materials design to endow materials and devices with biological structure and function; an expanded scientific basis for the performance and quality of implants; and advanced processing and manufacturing of biomaterials.

Today, about 11 million Americans have at least one biomedical implant and 30 percent of them have more than one. Biomaterials include tissue, teeth, heart valves, vascular grafts, knee joints, pill coatings, and reconstructive surgery. According to one workshop speaker, the field covers about 2,700 medical devices, 2,500 diagnostic products, and 39,000 pharmacological preparations.

Participants considered three questions: What principles, tools, and methods does the field need? What priorities will address the questions? And, if you had to put a biomaterial into your child, what would you like to know about it?

Dr. Robert Langer, Kenneth J. Germeshausen professor of chemical and biomedical engineering at Massachusetts Institute of Technology, described the field's current status. One of the serious problems, he said, is the need for new materials and a new approach to how they are designed. "Today, we take materials off the shelf. They've been used for other purposes than medicine," such as dacron, a clothing material redeployed to make vascular grafts.

Instead of that way, an interdisciplinary approach is required, he continued. Scientists from many disciplines such as toxicology, biomedical engineering, and chemistry, would work step-by-step on the design questions. And he took the audience through such a process for the development of a new biodegradable drug.

He outlined six areas that urgently need such an approach to materials development: drug delivery systems, in which materials should be designed for particular applications; tissue engineering, which could save many lives lost because of a lack of organ donors; minimally invasive surgical and other medical materials, which could alter how surgery is performed, even for serious conditions; imaging, which could greatly cut U.S. health care costs, gene therapy, which could be made more efficient and safer

with new vectors; and packaging treatment such that it is activated only at the target site, which includes such items as biosensors and diagnostic and therapeutic antibodies.

Among the innovations already in the works are a highly toxic cancer drug, which can target a severe brain tumor without causing systemic side effects, and "smart drugs," such as liquids that turn into gels when exposed to light and drugs that change shape at certain temperatures.

But Richard A. Hazleton, chairman and CEO of Dow Corning Corp., warned that such advances are in "the crosshairs of plaintiffs' attorneys." Without tort reform, manufacturers will be unable to stay in business because of the costs of a rising number of lawsuits, he said.

He noted that companies are asking only for reasonable protection against litigation. Consumers would still be able to sue and products would have to be "based on sound science," but limits would be put on awards.

He also stressed that the federal government needs to take an expanded role. Once standards are set, he noted, the government needs to defend them vocally and loudly. "What's lacking isn't the FDA's position on silicone's safety but the visibility of that position."

He illustrated manufacturers' plight with Dow Corning's experience with silicone breast implants. Although nearly 20 studies have found no evidence that the implants cause autoimmune illnesses, lawsuits recently forced the company to declare a Chapter 11 reorganization.

About 3 percent of Dow's total sales revenue now comes from biomaterials, Hazleton said. Companies want to continue manufacturing these products, he added. Doing so "makes us feel good as a company and as individuals."

Dr. Gail K. Naughton, president and chief operating officer of Advanced Tissue Sciences in La Jolla, Calif., spoke of other hurdles facing companies, especially the lengthy developmental process for products. Her company, which began in January 1986, is only now on the verge of introducing its first products, including tissue for burn patients that produces less scarring than current methods.

The workshop ended with a strong endorsement of the recommendations, to be written as a formal report and delivered to NIH. □



Frances Bergling Cannon recently received a Distinguished Alumna Leadership Award from her alma mater, Seton Hill College in Greensburg, Pa. She was honored for her achievements in science and for "being an example of faith in action." Cannon, a technical information specialist at NIDR, is currently detailed to the Disability Employment Program in the NIH Office of Equal Opportunity. She has been with NIDR since 1966, most recently working in the institute's Laboratory of Developmental Biology from 1974 to 1991. She then served on the NIH committee for employees with disabilities. At the award ceremony, she acknowledged her classmates, the class of 1960, for their help and guidance, saying, "They should be the ones to get the award." The alumna award is given for achievement and leadership in education, business, science and technology, arts, or voluntary service.

PC Topic Session, Dec. 7

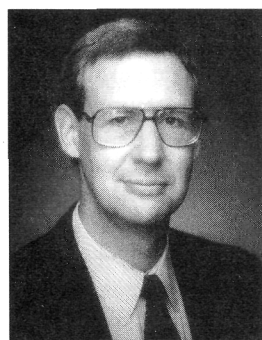
DCRT's Distributed Systems Branch holds regular PC Topic Sessions designed to keep NIH'ers up to date on rapidly advancing PC technology.

Featured Thursday, Dec. 7, from 9 to 10:30 a.m. in Bldg. 10's Lipsett Amphitheater, will be the NIH Electronic Computer Store. Recently set up by OD's Office of Information Resources Management (see story, p. 15), the store is a World Wide Web-based "virtual computer store" from which employees can order a wide range of computer hardware and software. It is designed to simplify and speed up the procurement process. At this session, OIRM representatives will give an overview of the program and answer questions. □

Two Associate Directors Join Division of AIDS

Two scientists have been selected as associate directors for key programs in NIAID's Division of AIDS (DAIDS): Dr. Carl Dieffenbach has been named associate director for the Basic Sciences Program and Dr. Patricia Fast has been selected as associate director for the Vaccine and Prevention Research Program.

"We have made a great deal of progress in the field of AIDS research, but much more needs to be done. These two highly qualified individuals have



Dr. Carl Dieffenbach

contributed significantly to our AIDS research agenda. We look forward to their continuing leadership in their new positions," said Dr. Anthony Fauci, NIAID director.

Dieffenbach served as chief of the Developmental Therapeutics Branch in the Basic Research and Development Program of DAIDS from 1992 to 1994. He has been acting associate director since 1994.

Before joining NIH, he was an associate professor in the department of pathology at the Uniformed Services University of the Health Sciences, where he currently serves as an adjunct associate professor of pathology. He was on the faculty of the Center for Advanced Training in Cellular and Molecular Biology at Catholic University from 1988 to 1992.

A native of Colorado Springs, Dieffenbach received his bachelor of science degree in biochemistry from the University of Maryland. He earned his doctorate in biochemistry from Johns Hopkins University and completed postdoctoral fellowships at both Johns Hopkins and USUHS.

The author of numerous articles and publications, Dieffenbach has focused on the roles of cellular factors in how viruses cause disease. He also has applied his expertise in cloning and PCR techniques to study cytokine regulation and to the cloning, expression and characterization of a cellular receptor for the mouse hepatitis virus. He is coeditor of the recently published laboratory manual, *PCR Primer*.

Dieffenbach is a member of the American Association for the Advancement of Science and the American Society of Virology. In 1994 and 1995 he also served as chair of the pathogenesis and etiology committee, NIH Office of AIDS Research.

Fast has been acting chief of the Clinical Development Branch within the Vaccine Research Development Program since July 1994. She came to NIH in 1990 as a senior medical officer and then as chief of the clinical development section of the Vaccine Research Development Branch. She played a lead role in the clinical and laboratory evaluation of candidate vaccines and in oversight of the AIDS vaccine evaluation group.

In recognition of her contributions to NIAID's efforts in HIV/AIDS vaccine development, Fast was the recipient of the NIH Merit Award in 1995.

She also received the PHS Special Recognition Award in 1992 as a member of the pediatric initiative group for outstanding contributions to the development and dissemination of information on perinatal transmission of HIV/AIDS.

Before joining DAIDS, Fast was a medical staff fellow at NCI's Metabolism Branch.

Prior to coming to NIH, she worked at Wellcome Research Laboratories in England on immune responses to pneumococcal polysaccharides and was assistant professor of microbiology and pediatrics at UCLA/Harbor General Hospital. In addition, she conducted research on hypersensitivity diseases at Upjohn Co.

Fast has authored numerous research papers and book chapters on basic and applied immunology and AIDS vaccine trials. Board certified in pediatrics, she is a member of the American Academy of Pediatrics, the American Association of Immunology, the American Society for Microbiology and the British Society for Immunology.

She earned her medical degree from Michigan State University and her Ph.D in microbiology and immunology from UCLA. She did her pediatric residency at the University of Michigan. □



Dr. Patricia Fast

Broadus Gets NIAMS Post

NIAMS' Melvin Broadus was recently promoted to the newly created position of deputy executive officer. He will also be chief of the Administrative Management Branch. He had previously been principal administrative officer for the institute. For his work in this position, Broadus was a 1995 recipient of the NIH Director's Award.

"Mr. Broadus' vast experience in administrative management combined with his unique ability to encourage and motivate staff, along with his leadership role in reinvention, make him perfectly suited to the position of deputy executive officer," said Margaret Kerza-Kwiatiecki, NIAMS executive officer.

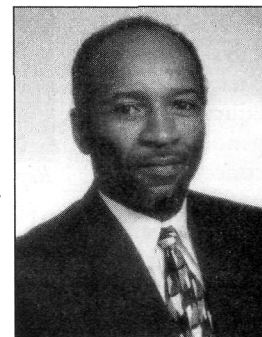
Broadus said creation of the new position and his being chosen for it "is a natural evolution of the institute's growth and of my personal growth. The need for this position has become more apparent as the NIAMS has developed over the last decade."

Some of his new functions will include budget work applying the new rules of reinventing and streamlining government.

He commented: "The institute is approaching its 10th anniversary. We are going through an organizational shift. Dynamics are changing. We are changing the way we do business.

Systems are becoming much more automated with computerization. The new position will work at tying in all of these systems. This will also help develop cross-training of personnel in the institute."

In 1971, Broadus began his federal career in the U.S. Marine Corps. He received an honorable discharge in 1973. Then he was employed by the Bureau of Medical Services in Hyattsville, Md., which was responsible for Public Health Service hospitals. He came to NIH in 1981 as a travel clerk for NIDDK. He was then promoted to travel assistant. He took a lateral move as administrative assistant, and eventually became an administrative officer. In 1987, he joined the newly created NIAMS. □



Melvin Broadus

DIVERSITY CONGRESS (Continued from Page 1)

training the NIH workforce in workplace diversity.

"This Diversity Congress is not so much about difference as it is about inclusion," said NIH director Dr. Harold Varmus, in opening remarks. "It's not about what makes us different or about the things that separate us. It is a step along the road that will hopefully bring us closer together. It's a way of trying to promote better understanding and relations with each other.

Sticking Together

"We need to create a culture that promotes mutual respect," Varmus continued, noting that in his own laboratory of 10 to 15 people, employees have come from many of the countries in Europe as well as India, China and Japan. "We've even had some people from Canada and Baltimore," he quipped. "We are a culture diverse in many ways—work background, education, age, gender, ethnic concerns, physical abilities, religious beliefs, sexual orientation, job category and so forth. This is true across the broad expanse of NIH. It's even more true and pertinent within the small groups and labs in which we work. Within these small workplaces, we have to learn to argue our cases when we disagree, but to respect each other and to work effectively. We have a challenge in this congress to see the common themes that bring us together despite our differences."



Rep. Connie Morella

The 2½-day congress consisted of two sessions open to all employees and a day-long closed session for some 115 delegates appointed by each ICD and various employee advisory groups and committees. The open sessions, which featured remarks by Reps. Connie Morella (R-Md.) and Albert Wynn (D-Md.), were televised to off-campus NIH locations as far away as North Carolina and Montana.

"I will have to leave this Diversity Congress soon and go back to the other diversity Congress," joked Morella, launching the congress on Oct. 25.

NIH director Dr. Harold Varmus (r) and OEO Director Naomi Churchill greet Congressman Albert Wynn (second from l) and a member of his staff, James Ballentine, at NIH's Diversity Congress.



"Your Diversity Congress will, I hope, be far more harmonious than the dome under which I serve at the present time.

"When I think about what's happening today at NIH," she continued, "I realize what a difference vision and commitment can make, a commitment centered around getting the most out of an organization by getting the most from its employees. An effective diversity initiative is a slow and careful process, one that will create doubts that anything is truly getting done. NIH's process will be no different, but the gains are increasing."

Referring to the nation's changing workplace demographics, the economic consequences of ignoring the impact of a diverse workforce, and the importance of judging ideas "based not on their source, but on their merits," Morella, who represents the 8th district of Maryland that includes NIH, offered humorous advice both for crossing a busy street and for branching into the uncertainty and change of managing diversity.

"Watch out for traffic, hold hands and stick together," she said, quoting from the book, *Everything I Ever Needed to Know, I Learned in Kindergarten*. "I think that makes an appropriate theme for NIH's Diversity Congress."

Defining the Issue

To explain the intricacies of what managing diversity means, and how it benefits any workplace both in terms of organizational success and employee morale, OEO contracted the services of Dr. R. Roosevelt Thomas, founder and president of the American Institute for Managing Diversity at Morehouse College in Atlanta. Author of several books on the issue, Thomas is an internationally recognized pioneer since 1985 in advising corporate America in

moving beyond EEO toward empowering a diverse workforce.

"How do you manage someone who is not like you, and who does not necessarily aspire to be like you?" he began, explaining the origins of managing diversity. "It is distinct from affirmative action and it is distinct from understanding and valuing differences."

Thomas said his definition of managing diversity comes from the perspective of the manager. Managing diversity disputes the "cream of the crop assumption" that many institutions still labor under, that is, 20 percent of employees will do 80 percent of the work and the remaining 80 percent of employees will do 20 percent of the work. "Managers

"Diversity is more than race and gender. It is about seeing employee differences—whatever those differences happen to be—as potential assets rather than liabilities."
—Naomi Churchill

operating under that assumption are not interested in tapping 100 percent of 100 percent of the people," Thomas said. "They will settle for tapping 100 percent of that 20 percent. If you're not interested in addressing 100 percent of the

workforce, in utilizing each employee's full potential, then managing diversity becomes less attractive as an option."

Thomas said he defines the word "diversity" as any collective mixture and that the term should be like using the word "stew."

"When I say 'stew' you don't think of onions here, peas there, carrots over there, potatoes over here," he said, "you think of a collective mixture. Traditionally, we have used the term two-dimensionally to refer to race and gender. Today, we're using diversity to refer to the workforce, therefore it refers to everyone in your workforce."

Finally, Thomas said, managing diversity should be looked at as a way of enabling and empowering the workforce to accomplish the organization's mission and that organizations need only consult

demographic forecasts to recognize its importance as a permanent way of conducting business.

Putting it in Perspective

"All in all, I am extremely pleased with the Diversity Congress," said OEO Director Naomi Churchill, in an interview following the congress. "It was a tremendous undertaking. I give the credit for our success to Joan Brogan and other members of my diversity staff, and to Jean Harris who had lead day-to-day responsibility.

"Each organization has its own culture," Churchill continued, reflecting on her experience establishing similar congresses at other institutions. "And each group of employees has its own timeline for when it is ready to accept change. I had two major expectations: I wanted to create a forum where employees could be heard, but also where management could begin a dialogue about change. I think we did that. And I think we did it with great style and substance."

Day two of the congress, which was open to delegates only, divided the participants into five smaller working groups designated by colors: blue, green, peach, pink and yellow. Although the final full accounting of the congress will be available early next year, recommendations and strategies to address congress objectives were reported by individual working groups on day three.

Notably, four of the five groups recommended maintaining a number of NIH's advisory groups and committees. In theory, establishing a Diversity Council—an OEO goal—would include representation of a cross section of the NIH population and address the interests of all employees, eliminating the need for special emphasis groups. Ironically, four of the five break-out groups also recommended some form of a single diversity advisory body.

"Managing diversity and other notions of inclusion are 'change strategies,'" Churchill pointed out. "I am not at all surprised that many of the delegates want to continue the old way of doing things. The kind of paradigm shift OEO is aiming for does not occur with one conference. It is an evolutionary process."

Other recommendations by the work

groups include requiring mandatory training in managing diversity for all employees, establishing an annual "multicultural week" that would celebrate the variety of NIH's workforce and expanding the EEO job performance element to include managing diversity.

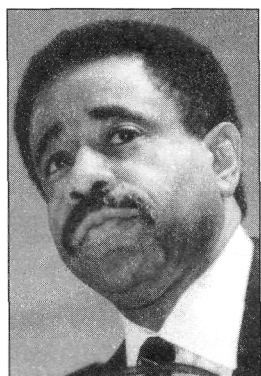
Changing—Top to Bottom

Similar to the stew analogy Thomas used on day one, Congressman Wynn said on day three that the old image of the United States as a large melting pot should be replaced with the U.S. as "more of a tossed salad," with each ingredient contributing its own unique taste to the dish's overall flavor. NIH as well must seek active inclusion of all segments of its population, he said. Wynn, who represents the only majority African American suburb district in the country and who Varmus introduced as a "friend of NIH," has helped NIH battle through some highly publicized EEO difficulties in the last few years.

"I've seen some changes I consider positive," Wynn commented, also noting his past criticism of the agency. "You've got a good thing going here. You've got people, you've got talent and you've got a commitment from the top. When management sends out the word, changes will occur. It reflects well on the National Institutes of Health. However, let's not make this a feel-good event and then not do anything."

The next step is to receive and review the congress's final report. As Morella pointed out in her remarks, the process of change can be interminably slow, but well worth the effort.

"I really want the NIH community to understand that managing diversity is a change strategy that empowers employees," Churchill concluded. "It is a problem-solving technique that seeks to identify and change organizational barriers to the full utilization of all workers. The barriers to full participation can be just about anything—from groups that operate in a de facto segregated manner to overstated job requirements. Managing diversity is not affirmative action. It is not special emphasis. Diversity is more than race and gender. It is about seeing employee differences—whatever those differences happen to be—as potential assets rather than liabilities." □



Dr. R. Roosevelt Thomas



Dr. Loretta Finnegan, director of the Women's Health Initiative (WHI), was recently a distinguished speaker and visiting professor at the University of Texas Health Science Center, San Antonio. She gave three lectures during the visit, and was presented with the keys to the city. An expert on hormone replacement, dietary issues, heart disease and breast and colon cancer in women, Finnegan related details of the 15-year, \$628 million WHI, which hopes to enroll more than 164,000 women at 40 medical centers across the country. She received her M.D. at Hahnemann University and has authored or coauthored more than 130 scientific publications.

NIEHS' Olden Honored

Dr. Kenneth Olden has been selected as the first annual recipient of the Distinguished Service Award in Toxicology from the American College of Toxicology (ACT) at its annual meeting, held recently in Vienna, Va. Director of NIEHS and the National Toxicology Program, he also delivered an address titled, "Toxicology in the 21st Century."

Olden, a cell biologist and biochemist, has studied the properties of cell surface molecules and their possible roles in cancer for more than 20 years. One of his recent research interests, the anticancer drug Swainsonine, was approved in 1991 by NCI for high priority development and possible clinical trials.

The Distinguished Service Award has been established by ACT as part of its mission to educate and lead toxicology professionals. "Kenneth Olden has made dynamic contributions to the advancement of toxicology and its role in the regulation of chemicals in modern society," said Dr. Sharon Northup, president of ACT. □

NINDS Sponsors Neuroscience Program at Morehouse

NINDS recently entered into a cooperative agreement with Morehouse School of Medicine (MSM) to establish a model neuroscience program. The program is jointly supported by NINDS, the NIH Office of Research on Minority Health, and MSM.

One of the historically Black colleges and universities (HBCUs), MSM is located in Atlanta, and is part of the Atlanta University Center, a consortium of schools that trains one of the largest pools of underrepresented minority students in the United States.

"The Atlanta University Center provides an ideal academic environment to foster the development of neuroscience research. We saw the center as a unique opportunity to develop a state-of-the-art neuroscience program that would serve as a resource for training undergraduate, graduate, postgraduate, and medical students," said Dr. Alfred Gordon, an NINDS health scientist administrator who handles the MSM Neuroscience Program.

One hallmark of the program is that it will promote substantial research collaborations between investigators at MSM and other NINDS grantees at such institutions as Georgia State University, Emory University, University of Tennessee at Memphis, Northwestern University, and the University of Virginia. "The scientific interactions between neuroscience investigators and students will contribute to enhanced training and research opportunities within the center," said Gordon.

The mission of MSM was recently extended to include not only training of primary care physicians but also postgraduate training in biomedical sciences with the establishment of multidisciplinary graduate programs offering Ph.D. degrees. In accordance with the new mission, MSM constructed a new building and dedicated the second floor to the MSM Neuroscience Institute where research supported by the NINDS cooperative agreement will be conducted.

According to Dr. Peter MacLeish, the newly recruited program director of the MSM Neuroscience Institute and professor of anatomy at MSM, "The mission of the MSM Neuroscience Institute is to create a supportive and challenging environment for state-of-the-art neuroscience research and

teaching related to the functional organization of the nervous system.

"The MSM Neuroscience Institute, and the neuroscience program in particular, will support research on the development and function of the nervous system with the hope that the knowledge gained will alleviate human suffering brought about by disorders of the nervous system," said MacLeish, who has previously held faculty positions at Harvard Medical School, Rockefeller University, and most recently, Cornell University Medical College.

NINDS's neuroscience program at MSM, which was started in September 1994, consists of several research projects. "We hope it will serve as a model for developing research programs at HBCUs that will lead to broader neuroscience training for faculty and students and increased collaborations with NINDS grantees from other institutions," said Edward Donohue, NINDS deputy director of extramural activities.

The NINDS-MSM cooperative agreement allows NINDS to work closely with Morehouse, lending not only financial support but administrative support as well. "We have had a great deal of input into shaping the comprehensive framework of this program. In that regard, our involvement with the senior leadership at MSM and investigators within the program is very different from that with other NINDS grantees," said Gordon.

Potential areas of research at the institute will include the molecular biology and physiology of circadian rhythms, signal transduction and modulation in the basal ganglia, neurotoxicity associated with HIV infection, and functional imaging at the cellular level. The investigations will use whole animals to study behavioral changes, the intact central nervous system to study anatomical and electrophysiological properties, and simplified preparations such as tissue slices and single cells to study cellular activities and cell-to-cell communication under controlled conditions.

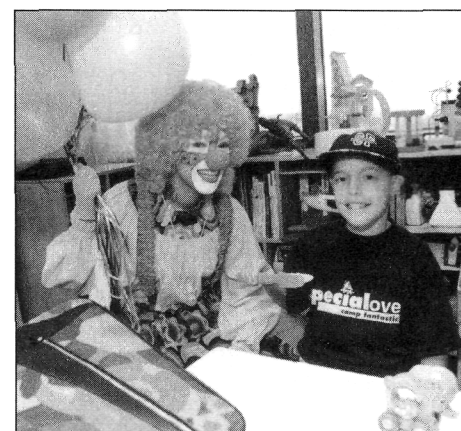
For NINDS and MacLeish, the long-term goal of the cooperative agreement with MSM is to support a neuroscience research and training program that will develop independent investigators who will be competitive for funding at the national level.—Shannon E. Garnett □

Division of Public Safety Created within ORS

There is a new entity within the Office of Research Services—the Division of Public Safety. This organization incorporates the functions of the Division of Security Operations and the Emergency Management Branch, formerly located in the Division of Safety. The new division is a result of streamlining initiatives and will enhance the quality of all emergency and related services, according to ORS.

The new division is under the direction of O.W. "Jim" Sweat, who has been director of security operations since its inception. Professional police and fire protection services are the most visible functions of the new division; however, crime prevention, security, fire prevention, emergency preparedness, transportation management, locksmith services, and the issuance of NIH identification cards and parking permits are also activities that fall within its purview.

"Now, more than ever, especially with the recent threats to the security of government facilities and employees, a coordinated police, fire and prevention organization is crucial in providing the maximum protection to the NIH," said Sweat. Added Steve Ficca, NIH associate director for research services, "This new division combines two similar, and exceptional, programs into one organization that will set the example for other federal agencies to follow." □



Wizzy the Clown joins Bernadette Jappell, a patient in the NCI pediatric unit. Wizzy was there recently on behalf of NIAID employees to present books and balloons to patients. NIAID employees also gave a \$200 donation to the Children's Inn at NIH. The money was a portion of the funds raised during the year through bagel, pastry and pizza sales for NIAID's annual employees' recognition picnic.

NLM Executive Officer Named

Donald C. Poppke has joined the NLM staff as executive officer, replacing Kenneth Carney who recently retired.

Poppke began his career here as a biologist in 1974 in the National Institute of Dental Research and, in 1981, he was selected for the NIH Management Intern Program with the Office of the Director. He later held two other NIH positions: in 1984 he was an administrative officer in the

National Cancer Institute, and from 1986 to 1987, he served as executive officer for the National Center for Nursing Research. At the time of his appointment to the NLM post, he



Donald C. Poppke

was chief of the Public Health Branch within the HHS Office of the Assistant Secretary for Management and Budget.

Poppke, who has a B.S. in biological sciences from Washington and Lee University and an M.S. in the technology of management from American University, is the recipient of numerous awards including the 1983 Outstanding Graduate Scholar of the Year from both the American University Center for Technology and Administration and the College of Public and International Affairs. In 1980, he received the Outstanding Young Men of America Award. He has also published in several scientific journals.

As NLM executive officer, he will be responsible for planning and directing the administrative management functions of the library, including financial, personnel, and contracts management, administrative services, and management analysis and legislation. □

Rock Creek Chamber Players' Final 1995 Concert, Dec. 10

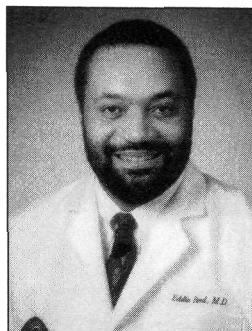
The Rock Creek Chamber Players will play their last 1995 NIH concert on Sunday, Dec. 10 at 3 p.m. in the 14th floor assembly hall, Bldg. 10, under the sponsorship of the Clinical Center recreation therapy section. The program will include Mozart's quartet for flute and strings in A major, K. 298; Martinu's 1942 quartet for piano and strings; and Brahms' piano trio in C major, op. 87. For more information, call (202) 337-8710. □

Reed Delivers 'Science Working for Us' Seminar

Dr. Eddie Reed, head of the medical ovarian cancer section and chief of the Clinical Pharmacology Branch of the National Cancer Institute, recently delivered a seminar titled "The Systemic Treatment of Advanced Stage Ovarian Cancer." Cosponsored by NIDDK and NCI, the seminar was part of the "Science Working for Us Series" which was started by the speakers bureau of the NIH Black Scientists Association (BSA). The goals of the series are to highlight the accomplishments of scientists from minority groups that are underrepresented in science and to disseminate information about minority health research.

"One way to open up greater opportunities for Black scientists is to demonstrate to the larger community what we have already accomplished," explained Dr. Roland Owens, a tenure-track researcher in NIDDK and cochair of BSA's speakers bureau.

Reed presented patient and laboratory



Dr. Eddie Reed

"One way to open up greater opportunities for Black scientists is to demonstrate to the larger community what we have already accomplished."

studies conducted by his group to determine the optimal conditions for the use of taxol, cisplatin and cytoxan in combination chemotherapy for ovarian cancer.

"Based on data analyses from the first 54 individuals treated," he said, "this treatment regimen has the potential of doubling the complete remission rate, as well as the survival rate, for this disease. Several potential problems were noted, including the costs of the regimen, as well as the fact that this patient cohort was in good general physical condition. For these reasons, a collaborative study is being undertaken with Massachusetts General Hospital and with M.D. Anderson, to determine if this regimen is transportable to the community hospital setting."

Reed received his bachelor's degree from Philander Smith College and earned his M.D. from Yale University in 1979. After completing his internship and

residency training in internal medicine at Stanford University Hospital, he came to NIH in 1981 as a fellow in medical oncology in the Medicine Branch of

NCI's Division of Cancer Treatment. In 1987, he became a senior investigator in the Clinical Pharmacology Branch and in 1988 was named coordinator of ovarian cancer studies in NCI's Clinical Oncology Program. In 1991, Reed became head of the medical ovarian cancer section and in 1993 was promoted to his current position as chief of the Clinical Pharmacology Branch.

His bibliography includes more than 130 publications in medical and scientific journals.

The Science Working for Us seminar series began last February with a minisymposium on sickle cell anemia research. The second program in July featured Dr. Wayne Greaves of Howard University and focused on the impact of AIDS on minority populations and women. The next program in the series—an overview of the contributions of underrepresented minority scientists, past and present—will be held on Feb. 16, during Black History Month. The keynote speaker will be Dr. Francine Essien of Rutgers University, who was recently named "U.S. Professor of the Year" by the Carnegie Foundation. □

NIH Theatre Group Presents 10th Annual Holiday Show

The NIH R&W Theatre Group will present its 10th annual Holiday Show on Friday, Dec. 8 and Saturday, Dec. 9 at 8 p.m., and Sunday, Dec. 10 at 3 p.m. in Masur Auditorium, Bldg. 10.

The show will be a musical celebration of the winter holiday season with such favorite songs as "Rudolph the Red-Nosed Reindeer," "Jingle Bells," "Santa Claus Is Coming to Town," and many others.

The Theatre Group is an ensemble of NIH employees and other community members who each year present a musical revue and a dramatic production for the benefit of the NIH Patient Emergency Fund. The group also presents traveling productions of its musicals.

For more information, call Elaine, (301) 589-0720.

Panel Endorses Alternative Therapies for Chronic Pain, Insomnia

Meditation, hypnosis, and biofeedback were among the alternative treatments endorsed by an independent 12-member panel convened recently to encourage wider acceptance of behavioral and relaxation therapies for treating chronic pain and insomnia. The conference, "Integration of Behavioral and Relaxation Approaches Into the Treatment of Chronic Pain and Insomnia," was sponsored by the Office of Alternative Medicine and the Office of Medical Applications of Research. It emphasized broader use of alternative therapies in conjunction with conventional medical care for these disorders.

Millions of Americans are afflicted with chronic pain and insomnia—two conditions with both psychosocial and behavioral characteristics. The suffering and disability from these disorders result in a heavy burden for individual patients, their families, and their communities as well as the loss of billions of dollars to the nation as a consequence of disability and lost productivity.

Conventional treatments for these conditions have principally focused on medical interventions such as drugs and surgery, which have had limited success. However, behavioral and relaxation techniques have been used to enhance conventional treatments.

Led by chair Dr. Julius Richmond, John D. MacArthur professor of health policy analysis emeritus at Harvard Medical School, the panel found strong evidence that relaxation approaches are effective in treating a variety of chronic pain conditions such as low back pain, arthritis, and headache.

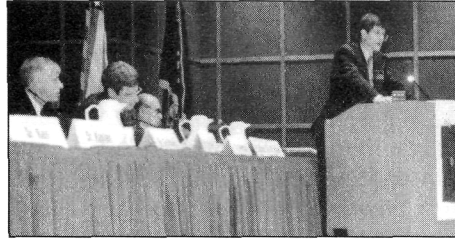
Relaxation techniques involve the practice of two basic components: a repetitive focus on word, sound, prayer, phrase, or muscular activity, and neither fighting nor focusing on intruding thoughts. When performed properly, relaxation therapy can lower one's breathing rate, heart rate, and blood pressure.

The panel stated that there was evidence that hypnosis is effective in alleviating chronic pain associated with various cancers. Hypnosis can also be a part of the treatment program for irritable bowel syndrome, inflammatory conditions of the mouth, temporomandibular disorders, and tension headaches, the panel concluded.

After examining the data on biofeedback techniques, the panel determined that this therapy was effective in relieving

chronic pain—citing tension headache in particular. Cognitive/behavioral techniques, which teach individuals to alter patterns of negative thoughts, are also effective therapies, primarily in the treatment of low back pain and arthritis, the panel said.

The panel concluded that the relaxation and biofeedback techniques used for chronic pain were effective in alleviating some types of insomnia.



Dr. Wayne B. Jonas, OAM director, speaks to a technology assessment panel.

However, they determined the most effective treatments for insomnia include sleep restriction, stimulus control, or a combination of a variety of sleep disorder therapies.

While behavioral and relaxation techniques have increasingly been used in conjunction with conventional medical care, the panel identified a number of barriers that to date have limited wider acceptance of these techniques.

One has been the emphasis on treating chronic pain and insomnia strictly as medical conditions without considering their psychosocial components. The panel recommended that health care practitioners adopt a biopsychosocial approach to disease that incorporates the patient's experience of disease and expands the potential treatments available.

A second barrier identified by the panel is the patient's acceptance and willingness to participate in behavioral techniques, which can be time consuming and often must be practiced at home. The panel recommended patient education to promote increased understanding of the importance and potential health benefits and willingness to participate in these interventions.

The reluctance of insurance companies and other third party payers to reimburse for behavioral and relaxation interventions was identified by the panel as another barrier to wider use of alternative therapies. The panel encour-

aged insurance reimbursement of psychosocial therapy for chronic pain and insomnia as part of comprehensive medical services at rates comparable to standard medical care. Additionally, provision of these treatments should be included in expanding managed care programs. The panel said decisions will need to be made to identify practitioners best qualified to provide psychosocial interventions in the most cost-effective manner.

The conclusion was that a number of well-defined behavioral and relaxation interventions are now available, some of which are commonly used to treat chronic pain and insomnia. However, data are insufficient to conclude that one technique is more effective than another for a given condition.

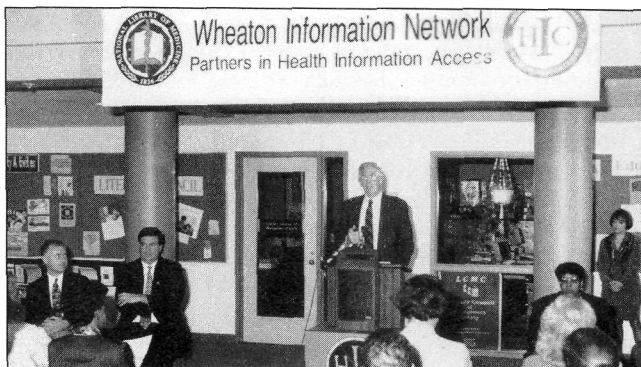
The independent panel, which included doctors, nurses, epidemiologists and statisticians, presented its recommendations at the conclusion of a 3-day technology assessment conference. For the complete statement of the recommendations, call 4-6627.—Anita Green □



"The Science of Business" was the topic of a recent poster session designed to highlight the best practices of business reinvention or reengineering at NIH. Here Tannia Cartledge (l) of the Clinical Center nursing department speaks to one of the more than 1,000 participants. The poster, "Merger Motorway Project," describes a plan to assure continuity and quality of patient care as patient care units are merged. The plan, created by 50 employees in the CC Nursing Service, aims to reduce the stress and anxiety of both patients and CC staff during the merger process. The first-of-its-kind poster session about NIH business activities was sponsored by DCRT, NIAID and the NIH reengineering oversight committee, and featured 21 posters from across NIH.

NLM, County Provide Enhanced Information Services

A new project to improve public access to AIDS and environmental health topics through a local public library was unveiled recently at ceremonies at Wheaton Regional Library's Health Information Center. The project, which provides access to NLM databases and to other resources on the Internet, was funded through a contract between the National Library of Medicine and the Montgomery County department of public libraries.



Dr. Donald Lindberg addresses an audience at ceremonies celebrating the new partnership between NLM and Wheaton Regional Library. Other speakers include (seated, from l) Derick Berlage, president, Montgomery County Council, and Douglas M. Duncan, Montgomery County executive.

One workstation will provide easy access, via Grateful Med, to NLM databases dealing with HIV/AIDS, toxicology, and environmental health topics. Two other workstations will be set up with the Health Information Center Home Page to guide users to relevant consumer health topics on the Internet.

"Historically, the NLM has served primarily doctors and scientists," NLM director Dr. Donald Lindberg said. "With today's emphasis on health information for consumers, we are pleased to join with Montgomery County in this pioneering effort to encourage citizens to take advantage of the new technology to access NLM's AIDS and environmental databases."

County Executive Douglas M. Duncan thanked the library for its "generous

support of this important service, which will allow more information and better access to resources on AIDS and environmental health for not only Montgomery County residents but for people throughout the region."

Following the official ceremonies, more than 100 guests had an opportunity to tour the Health Information Center.

A number of groups are represented on an advisory committee that will continue to provide guidance to the project. In addition to the county department of public libraries and NLM, they include the Maryland department of education's division of library development and services; the Whitman Walker Clinic; the University of Maryland Health Sciences Library; Howard University; the Ministerium Roundtable; and a number of community representatives. □

Help NIH, Alumni Association Preserve Historic Artifacts

Is your lab or office the resting place for an object of importance in the history of NIH? Do you know where the cornerstone for your building is located? For the Clinical Center? Is there a memorial plaque or a portrait of an earlier lab chief somewhere on your shelves or in a file cabinet? Do you have laboratory uniforms from the 1940's in your attic at home? Are there pictures of lab members (with dates and identification) on your walls? Do you know of a time capsule buried on the NIH grounds or embedded in one of the buildings?

If you know the whereabouts of these or other historic NIH artifacts, the NIH Alumni Association (NIHAA) wants to hear from you. The NIHAA is cooperating with the NIH Historical Office and Stetten Museum on a project to identify and label historic artifacts, so that future scholars may be able to reconstruct the story of NIH—and some of our fellow workers' accomplishments that have already been memorialized. The objects and memorabilia of interest are broadly defined. They include sculpture, portraits, memorial plaques, medals, blueprints or building floor plans, models of the buildings and grounds, and the famous model of the DNA double helix in the National Library of Medicine.

The goal of the project is to identify these objects and to label them unobtrusively, not to disturb or move them. In the future, the labels will alert anyone who considers disposing of objects that the objects are of historic importance and should be sent to the museum rather than discarded. Objects that current custodians wish to donate now will be reviewed by the museum's collection committee for possible accessioning.

If you have anything, or know the whereabouts of likely historical artifacts, contact Richard Seggel, chair of NIHAA's history committee, (301) 424-6449. □

Camera Club To Meet, Dec. 12

The NIH R&W Camera Club will meet on Tuesday, Dec. 12 at 7:30 p.m. at the FAES House—at the corner of Cedar Ln. and Old Georgetown Rd. opposite the county firehouse—for a pot luck holiday party. Entertainment and beverages will be supplied. Come to have fun and share the holiday spirit with no photographic competition. Just bring something to eat and be ready to enjoy the company of fellow photographers. □

FAES Spring Courses Announced

The FAES Graduate School at NIH has announced the schedule of courses for the spring semester. The evening classes sponsored by the Foundation for Advanced Education in the Sciences will be given on the NIH campus.

Tuition is \$75 per credit hour, and courses may be taken for credit or audit. Courses that qualify for institute support as training should be cleared with supervisors and administrative officers as soon as possible. Both the vendor's copy of the training form and the FAES registration card must be submitted at the time of registration.

Courses are offered in biochemistry, biology, biotechnology, chemistry, immunology, languages, medicine,

microbiology, pharmacology, psychology, psychiatry, statistics, toxicology, administration and courses of general interest.

It is often possible to transfer credits earned to other institutions for degree work, and many courses are approved for AMA category I credit.

Classes will begin Jan. 29, mail registration ends Dec. 29, and walk-in registration will be held from Jan. 8 through 12. Spring schedules are available in the graduate school office in Bldg. 60, Suite 230; the foundation bookstore, Bldg. 10, Rm. B1L101; and the business office in Bldg. 10, Rm. B1C18. To have a schedule sent, call 6-7977.

The NIH Life Sciences Education Connection

"This is just like Christmas!" That comment was heard several times a day as science teachers grabbed publications at a Public Health Service exhibit booth. "These will be great for my class," the teachers said about the materials produced by NIH, CDC, FDA, HRSA, and other PHS agencies.



The exhibit was set up recently in Phoenix, where nearly 2,000 biology teachers from around the country met for the annual convention of the National Association of Biology Teachers. Attendees included high school and college teachers as well as school administrators.

The most popular materials were those about genetics, cancer, AIDS, and mental health. While teachers said they will use the publications as supplemental classroom materials, they also said they were taking at least one publication home for themselves—an NIMH publication called *Handling Stress*.

The NIH Office of Science Education (OSE) coordinated the display and distribution of PHS publications at the Phoenix convention. OSE is working with NCCR's Medical Arts and Photography Branch to develop a new booth representing NIH and its education efforts. The booth is scheduled to debut at the annual convention of the National Science Teachers Association next March.

If you have questions or suggestions about this ongoing outreach effort, call OSE, 2-2469. □

Council of Governments Honors Gary Freeman

For the third year in a row, the Division of Public Safety's police training program has been deemed outstanding by area law enforcement managers and trainers. The division's training administrator, Gary W. Freeman, was honored recently as Police Trainer of the Year by the Metropolitan Council of Governments' police chiefs committee.

An embossed plaque was presented to him at a meeting attended by the chiefs of all Washington metropolitan area police departments and high ranking military personnel from area military installations. The plaque cited Freeman's work in providing training not only to the NIH Police, but also to 17 other local, state and federal law enforcement agencies. Freeman's selection as Trainer of the Year followed awards for Training Program of the Year last year and second best trainer the year before that.

Freeman has spent many years in law

enforcement and law enforcement training. He was an NIH Police officer for 5 years prior to his appointment as training administrator, and is a retired captain from the Maryland Division of Corrections, where his duties included training correctional officers. In the past year, he has provided more than 6,000 hours of training for officers and civilians. His training has enabled other NIH Police officers to provide instruction to officers from neighboring jurisdictions. The extensive list of other jurisdictions waiting for Freeman's services promotes the reputation of the NIH Police; in turn, NIH Police officers are routinely invited to attend training sponsored by other law enforcement and military police agencies.

Freeman holds a bachelor of science degree in criminal justice from Coppin State College. He is also a member of the HHS task force on violence in the workplace.

NIH Magazine Special Issue Honored

The *NIH News & Features* magazine special issue devoted to research on minority health won a Silver Award in the 1995 Excellence in Print Awards competition sponsored by Washington Edpress. *News & Features*, produced by the NIH Office of Communications, was entered in the category of one- or two-color magazines without ads. Award certificates were presented to Anne Thomas, NIH associate director for communications; Bernadine Moore, retired public affairs specialist; and Mary Sullivan, editor of the magazine. The minority health issue was produced with assistance from the Office of Research on Minority Health and the ICD information offices. Washington Edpress is a nonprofit organization for publications and public relations professionals in the Washington, D.C., area. □

NIDDK Staffer Receives GSA Award, Seven Others Complete IRM Courses

Anne Robertson, a computer program analyst in NIDDK's Office of Administrative Systems Technology, recently received a Special Achievement Cash Award from the General Services Administration.



Anne Robertson

GSA cited her for her "instrumental part in the success of the '1,000 by the Year 2000' Program at NIH through the University of Maryland." The program developed by GSA intends to certify 1,000 information resource managers (IRM) capable of supporting

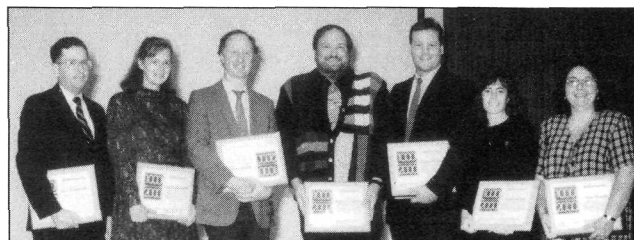
the federal workforce with their knowledge of cutting-edge computer information systems and the newest technologies.

This graduate-level training is run cooperatively with the University College of the University of Maryland, Syracuse University, and four other Washington-area universities. Robertson has worked with the program for 4 years, publicizing it, recruiting and registering NIH staff.

Seven NIH staffers received IRM certificates for completing six graduate courses. They are Judith Ann Baier, DRG; Terrence W. Dunne, NIA; Stephen Hughes, NCI; Gary N. Johnston, CC; Maria Meredith, DRG; Richard

Twomey, NCI, and Catherine D. Walker, NIAID. Several will continue their studies for a master of science degree in information resource management.

Anyone interested in the program may inquire by email to eat@cu.nih.gov.



Recipients of IRM certificates include (from l) Gary N. Johnston, CC; Katherine D. Walker, NIAID; Richard Twomey and Stephen Hughes, NCI; Terrence W. Dunne, NIA; Judith Ann Baier and Maria Meredith, DRG.

NIH 'Virtual Computer Store' Opens

Recently, the NIH Computer Acquisition Center (a partnership between the Office of Information Resources Management and the ADP Branch of the Office of Procurement Management) awarded multiple contracts to 17 computer resellers to establish a "virtual computer store" to allow employees at NIH and HHS to shop electronically for everything from



Members of the computer store project team include (from l) Manny De Vera, Lynn Kelly, Dave Hunter, Patricia Pemberton and Carol Marcotte.

the latest in desktop computers to office automation software. Under this multiple-award contract, estimated to be worth more than \$90 million over 2 years, contractors will provide a broad range of commercial off-the-shelf PC and Macintosh equipment, including laptops, software, peripherals and operating system software with name brands such as Apple, AST, Compaq, DEC, Dell, HP, IBM, and Packard Bell.

Many of the vendors now advertise their computer equipment available on the contract on home pages set up on the World Wide Web. The home pages, which collectively will be called the NIH Electronic Computer Store, are electronic catalogs that list prices, brief product descriptions and model numbers of equipment available. Some vendors are expected to have graphic images of their products on their home pages. Using a web browser such as Netscape, users may access the Electronic Computer Store, which lists all vendors, at the following address: <http://www.nih.gov:80/od/oirm/nihecs.html>.

The home pages will be linked so users can easily switch from one vendor to another. Scientists, health professionals, managers and administrators throughout the department will be able to shop at the Electronic Computer Store.

This centralized contract simplifies procurement procedures while providing

current competitive prices. The store also is a first step toward establishing electronic commerce at NIH. In the past, users at NIH have had to use many different contracts and submit thousands of small purchases.

In addition, the contract is a means for NIH to establish more accountability in its acquisition process. NIH procurement and IRM officials will periodically review vendors' performance in such areas as delivery times and customer service. There is a 2-year warranty on all products. The ordering guide is also located on the OIRM home page. Three training sessions have been conducted and are continuing. □

Tenors Needed for Group

Experienced tenors are needed by the NIH Chamber Singers, an NIH R&W organization. The singers are a small a cappella group that sings a variety of music. The group rehearses and performs locally. Contact Susan, 6-4496, for more information. □



TRAINING TIPS

The Division of Workforce Development, OHRM, offers the following courses:

<i>Courses and Programs</i>	<i>Starting Dates</i>
<i>Management and Supervisory</i>	
Federal Budget Process	1/10
Working With Personal Differences	12/7
Reinventing NIH: An Introduction to Work Process Design	12/7
Successful Management at NIH	12/12
Effective Supervision: A New Role Perspective	12/12
<i>Communication Skills</i>	
Report Writing	12/14
Working With Personal Differences for Technical and Support Staff	12/12
<i>Special Courses</i>	
NIH Retirement Seminar	12/11
<i>Administrative Systems</i>	
Domestic Travel	1/16
Delegated Acquisition Training Program	1/8
Buying from Small and Large Businesses on the Open Market	1/17
Consolidated Purchasing Through Contracts	1/18
Federal Supply Schedules	1/19
IMPACT for Administrative Staff	12/12
IMPACT A-TRAIN	12/11, 12

Administrative and Skills Development
Fundamentals of Grammar

1/17

Personal Computing

WordPerfect 6.1 for Windows

1/16

Intro to Windows 3.1

1/9

For more information, call DWD, 6-6211 or consult the DWD Catalog. □

FedEx Wins GSA Contract

The General Services Administration will continue to provide contract coverage for domestic express small package delivery service through May 15, 1996, with FedEx. All prices, terms and conditions remain the same.

Recently, instances were reported of employees allegedly using government FedEx accounts to send personal items. As a reminder, FedEx government overnight service is for official urgent business use only. Employees should not use this account to send personal items. Such use violates the federal criminal law prohibiting conversion of government property to personal use. Misuse of federal property carries serious penalties, including fines and/or imprisonment if the employee is prosecuted.

Because next-day express small package delivery is premium transportation, use FedEx only for letters or small packages under the following circumstances: If there is an "extreme urgency" and the package must be received at a destination by noon the next business day; if the value or usefulness will be lost, or greatly diminished, if not delivered by noon the next business day; if next day service is required to accomplish the NIH mission.

Users should send non-urgent letters and packages through the U.S. Postal Service via the NIH Mail system. This will ensure compliance with statutes and save the government money. In addition, ICDs in the Bethesda/Rockville area must continue to send non-contract shipments (e.g., International, Priority Overnight, Domestic Heavyweight Freight, Deferred Deliveries) to Central Shipping, Bldg. 13, Platform E, Rm. 1771. Refer to NIH Yellow Pages for "Shipping and Receiving Instructions" and NIH Policy Manuals 26101-42-F "Shipping Policies and Procedures" and 26101-43-F "Overnight Delivery Government Contract for Domestic Shipments."

For more assistance, contact Blaine Jacobs, 6-5921. □

Health Fair Rescheduled

The 1995 Health Fair was interrupted due to the federal government shutdown. Another fair has been scheduled for Friday, Dec. 8 from 10 a.m. to 2 p.m. in Wilson Hall, Bldg. 1 (third floor).

Abnormal Breathing Control Implicated in SIDS Deaths

Some infants who later succumb to sudden infant death syndrome, or SIDS, exhibit impairment in their ability to control breathing during sleep as early as the first week of life, according to a new study funded by NICHD. These findings differ from earlier reports of normal overall breathing patterns in SIDS victims, and indicate that the defect underlying SIDS may occur before birth, during fetal development.

In this new study, scientists at the University of California at Los Angeles, in collaboration with scientists at Brompton Hospital and the University of Sheffield in Great Britain, recorded heart and breathing patterns in 6,914 apparently normal, healthy infants that ranged in age from two to 65 days. Sixteen of the infants in this group later died of SIDS.

Investigators then compared 16 physiologic recordings of SIDS victims to 35 recordings of age-matched control infants. Unlike previous studies that used gross measures of respiratory rate—and found no differences in overall respiratory rate or variation—this study used a unique measure, originally designed to detect changes in heart rate, to plot the amount of time from one breath to the next, or the breath-to-breath interval.

Using this approach, the investigators were able to compare each breath-to-breath interval to the previous one while controlling for breathing rate. They found that infants who later died of SIDS exhibited less variation in breath-to-breath intervals at slow breathing rates during sleep than did infants who survived. Specifically, breaths following long breaths showed less change in infants who later died. This finding indicates a more "rigid" control of respiration, and, theoretically, less responsiveness to physiologic input than that found in control infants.

"If you look at the moment-to-moment changes, what you find is that at very slow breathing rates, such as those found during sleep, infants that later die don't change their breathing intervals as much as normal infants," explained NICHD grantee and project investigator Dr. Ronald Harper of UCLA. "The altered breathing patterns suggest a subtle difference in the control of breathing in infants who die of SIDS. Such a difference points to the brain areas which fail when vulnerable infants encounter a

potentially lethal respiratory challenge during sleep."

SIDS is defined as the sudden, unexplained death of an infant under 1 year of age. Death is associated with a sleep period. Approximately 5,000-6,000 United States infants die of SIDS each year, making it the leading cause of death among infants 1 month to 1 year of age. Usually, infants are apparently healthy before succumbing to SIDS, and show no signs of danger.

Previous studies by Harper and colleagues have identified abnormal heart-rate variability in infants who later died of SIDS. These studies found an apparent restriction in the extent of change from one heartbeat to the next in these infants. Because heart and breathing rates are so deeply intertwined—simply changing from a seated to an upright position causes a change in breathing rate and a compensatory change in blood pressure—Harper and his team of researchers were inspired to investigate moment-to-moment breathing patterns.

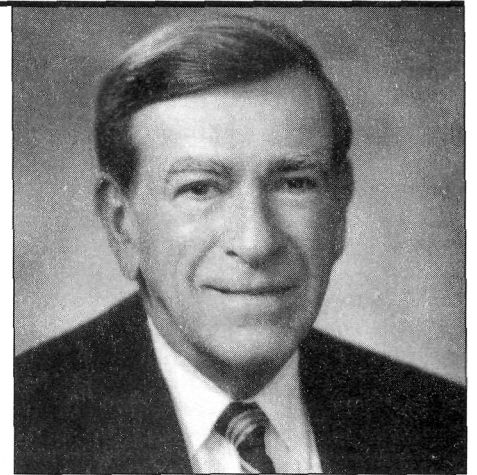
"The cardiac patterning differences indicated that there must be some change in breathing, because heart rate and breathing are so closely interrelated; you can't really get a change in one without getting a change in the other, in normal circumstances," Harper said.

Another factor implicating respiratory-control problems was that SIDS infants have fewer breathing pauses, or apnea, than other infants. Although breathing pauses normally occur in infants, earlier studies done by these researchers found that infants who later died of SIDS exhibited fewer short pauses in breathing, even though their respiratory rates and variability were normal.

The findings from this new study offer the hope of eventually developing screening tests to identify infants who are at risk. The next step is to try to identify the brain structures involved and the developmental stage at which the defect may occur. □

Jujitsu Club Welcomes All

The NIH Jujitsu Club is welcoming new members at all skill levels. The club meets on Tuesdays and Thursdays from 8:30 to 10 p.m. in the Malone Fitness Center, Bldg. 31C, Rm. B4C18, call 6-TRIM. The monthly membership fee is \$20. For more information, contact the instructor, Dr. Rick Jobin, 6-7783. □



Dr. Lawrence E. Shulman, NIH emissary for clinical research to the academic health centers, and director emeritus of NIAMS, was the recipient of the Gold Medal Award from the American College of Rheumatology (ACR) at its recent national meeting in San Francisco. The Gold Medal, the highest award the ACR bestows, was given to Shulman "in recognition of his major contributions to rheumatology in the United States." He is an expert in the research and treatment of lupus, and discoverer of eosinophilic fasciitis, also known as Shulman's disease.

Takoma Mandoleers Perform

The Takoma Mandoleers will perform in concert on Sunday, Dec. 17 at 3:30 p.m. This free concert, open to the public, is sponsored by the Clinical Center rehabilitation medicine department and will be held in the 14th floor assembly hall in Bldg. 10. The Takoma Mandoleers, founded in 1923, is the oldest mandolin orchestra in the United States. Its musical selections include classical, popular, marches and ragtime. For more information, call Bob Hammond, 4-8886, or evenings, (301) 990-6718. □

Calling All OS/2 Users!

If you use or are interested in OS/2 and would like to be in touch with other users at NIH, contact Alexander Ling. He is trying to find out if enough interest exists to establish a user's group, a campus listserver/mailling list, campus-wide newsgroup, or some other means of communication and cooperation. Send email (include "OS/2 survey" in subject line) to al52x@nih.gov, or call 6-7700 ext. 235, or send campus mail to A. Ling, Bldg. 10, Rm. 1C660. Be sure to include your name, preferred means and times of contact, and any comments you may have. □